



Adjusting an Institutional Claim from an ICD-9 Coded Claim to an ICD-10 Coded Claim in the CHAMPS - ICD10 Parallel/B2B Test System

If you have questions regarding these instructions, contact MDCH-B2B-Testing@michigan.gov

Important considerations when working in the CHAMPS – ICD10 Parallel/B2B test system:

- a) MDCH anticipates that providers using this test system have experience with Single Sign-On (SSO) access, and are knowledgeable in how to navigate and work within the production CHAMPS system. Providers unfamiliar with the application should consult experienced associates within their organization.
- b) The test claims and any changes you enter in the CHAMPS ICD10 Parallel/B2B Test system will **NOT** post to the CHAMPS production system.
- c) Please caution your associates to be careful selecting an application when using SSO, to insure they submit production claims in the CHAMPS system, and only submit test claims in the CHAMPS ICD10 Parallel/B2B system.
- d) If desired, you may create a complete test claim (Professional, Dental, or Institutional) in the same way you would create a real-life claim in the production CHAMPS system. The following procedure allows you to make use of prior paid *Institutional* claims to aid in creating test ICD-10 Institutional claims. The paid claims history available within the B2B Test system consists of claims paid in the production CHAMPS system within the date-of-service range of January 1st, 2013 through June 6th, 2014.
- e) The procedure to create a Professional or Dental claim varies somewhat from the following; please use the appropriate method for the type of claim you normally submit, and contact MDCH-B2B-Testing@michigan.gov if you have difficulty.
- f) The "dummy" ICD-10 compliance date, used only in the B2B Test system, is *June 1st*, *2014*. As announced by CMS, the national ICD-10 code implementation will be October 1st, 2015.
- g) Do **not** close a window by clicking the X in the upper-right hand corner of the window, the underlying window will remain disabled and you'll have to re-login.

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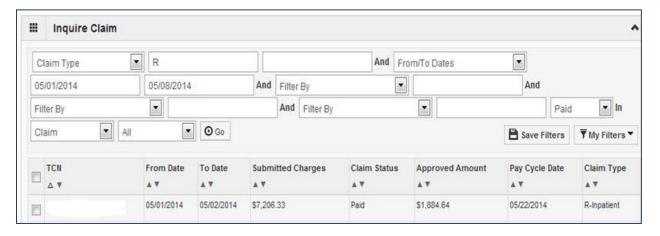




The adjustments described in this document are performed by using Michigan's SSO portal to access the **CHAMPS - ICD10 Parallel/B2B** test system; subscription instructions can be found at: http://michigan.gov/tradingpartners >> HIPAA ICD-10 Implementation >> Testing >> SSO Access Instructions for ICD10 B2B (located near the bottom of the web page)

1. Logon to SSO and select the *CHAMPS – ICD10 Parallel/B2B* test system. Use the *Inquire Claim* filter to view paid claims. To find a TCN that is *Paid*, use type *Inpatient* (Claim Type=*R*) with *From/To Dates* before the Test ICD-10 Compliance Date of 06/01/2014. Change the last filter to *All*. When the system displays paid claims, review them to select one you wish to re-code.

See sample filter below, accessible from the *Inquire Claim* menu selection under the Claims menu.



NOTE: The test system denies a large number of re-coded test claims due to lack of eligibility. When choosing a claim to edit, verify the beneficiary is only in a *Fee for Service* benefit plan and not in a Managed Care benefit plan during the adjusted claim's dates of service. This is verified from the *Eligibility Inquiry* menu selection under the *Member* menu.

When you find a TCN to adjust, make a note of the TCN number: you will need it to do the adjustment and to check the results.

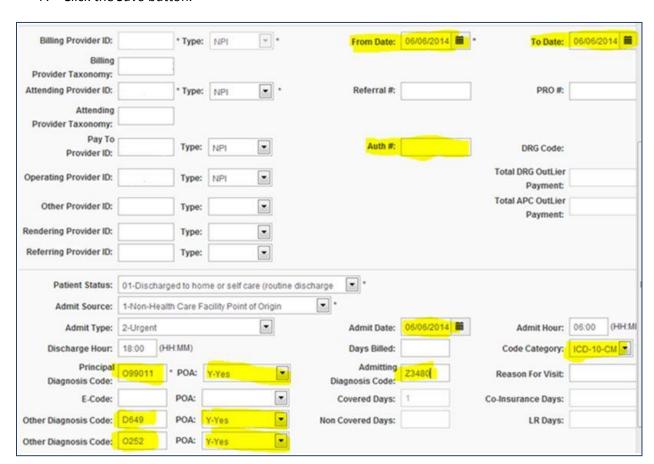




2. Start adjusting the TCN by going to the *Adjust/Void Claim* Provider menu selection under the *Claims* menu, entering the *TCN* number, and clicking *Go*.



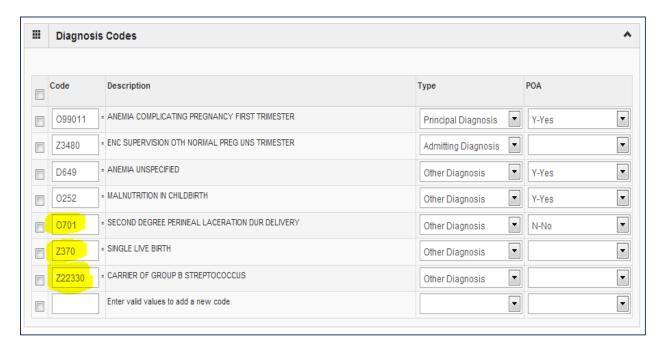
- 3. Change Header information
 - A. Change the From Date, To Date, and Admit Date to dates on or after 06/01/2014.
 - B. Change the ICD-9 codes to ICD-10 codes.
 - C. Populate the POAs, if blank.
 - D. Change Code Category to ICD-10-CM.
 - E. Remove Auth #, if exists.
 - F. Click the Save button.



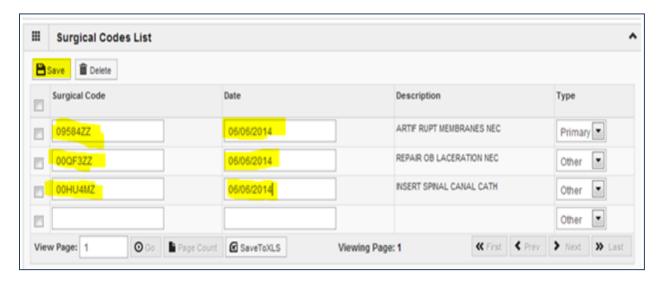




4. Change any remaining ICD-9 codes to ICD-10 codes by going to the *Show* dropdown list in the upper-right portion of the screen, selecting *Diagnosis Code*, and entering your changes; click the *Save* button.



5. Change *Surgical Codes*, if any, from ICD-9 to ICD-10, by going to the *Show* dropdown list in the upper-right portion of the screen and selecting the *Codes List* selection. You must also change the dates to fall within the *From* and *To* dates contained in the header. Then click the *Save* button.







6. Go back to the *Claim Header Detail* screen and click the *Adjust* button, by going to the *Show* dropdown list in the upper-right portion of the screen and selecting the *Claim Header Detail* selection.

If you have not yet done so, make a note of the original TCN for later reference, this is your last opportunity to view the original TCN number (shown in the *Original TCN* field).



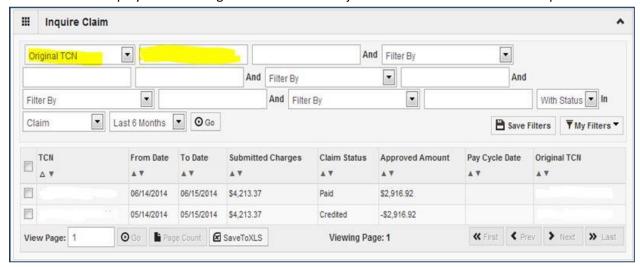
7. Enter a text description in the Comment field on the Adjust Claim screen and press OK.







8. Get the adjustment results by looking up the *Original TCN* that you recorded earlier: go to the *Claims* drop-down menu, select *Claim Inquiry*, select *Original TCN*, and paste in the TCN you recorded earlier. The screen will display **both** the original claim and the adjusted claim information. See sample below:



9. If you also want to receive the resulting HIPAA 835 - Remittance Advice file in your DEG mailbox, send a request email containing your DEG mailbox ID, the NPI number entered on your test claims, and your telephone contact information, to MDCH-B2B-Testing@michigan.gov. The system sends requested test 835 files (DEG Application ID of 4987T) on alternate Fridays.

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